POLITICAL ACTION COMMITTEE (PAC) QUARTERLY REPORTING FORM

Calendar Year <u>2016</u>

To be filed with:

Mark Martin, Secretary of State

MY COMMISSION # 12370139

EXPIRES March 9, 2019

My Commission Expires: 3-9- / 9

For assistance in completing

Arkansas Ethics Commission

this form contact:

State Capitol, Room 026 Little Rock, AR 72201 Phone (501) 682-5070 Fax (501) 682-3408	☐ Check if this report is an amend	dment	Post Office Box Little Rock, AR Phone (501) 324 Toll Free (800) 4	72203 1-9600	
1. NAME OF COMMITTEE (IN FULL)			2. TYPE OF REPORT		
Benton County Republican Women (PAC)			Ď First Quarter-due April 15 covers January 1 through March 31		
ADDRESS FILED		Į	☐ Second Quarter-due July 15		
	FILLE	ĺ	covers April 1 thro		Ì
APR 1 2 2016			☐ Third Quarter–due Oct 15 covers July 1 through September 30		
DA RN 1140			☐ Fourth Quarter-due Jan 15		
P.O. DON 1018 Arkensas			covers October 1 through December 31		
CITY, STATE AND ZIP CODE	Secretary of State	c	3. Will PAC renew it upcoming cal		
D .		[
Bentonville, AR 72412			NOTE: If "YES" registration renewal must		
Cononvie, AR 1	× 11.0.		be submitted with Fo	ourth Quarter report	
SUMMARY		FO	R REPORTING	CUMULATIVE	٦
			PERIOD	TOTALS	
4. BALANCE OF FUNDS AT BEGINNING OF REPORTING PERIOD			-0-	i	ı
5. INTEREST EARNED ON COMMITTEE FUNDS (IF ANY)					
6. TOTAL MONETARY CONTRIBUTIONS RECEIVED					╛
7. TOTAL CONTRIBUTIONS MADE TO	CANDIDATES/COMMITTEES	<u> </u>			_
8. ADMINISTRATIVE EXPENSES					
9. BALANCE OF FUNDS AT CLOSE OF REPORTING PERIOD		<u> </u>	o_		
10. (X) NO ACTIVITY (check if you have not received or made any contributions during this reporting period)					
I certify under oath that I have examined this report and to the best of my knowledge and belief the information so disclosed is a complete, true, and accurate financial statement. Signature of PAC Officer Signature of PAC Officer					
State of Arkansas)	7	
} ss County of Arkansas					
Subscribed and sworn before me this _	lo day of April	2	<u> ما ۱</u> و		
RUSTON BLATY RUSTON BLATY RUSTON BLATY					
EL ASSIGNACION DEPOT	17 M. 24 II	_			

Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inked) and the original must follow within ten (10) days.

Signature of Notary Public